

Parish Profile Questionnaire

Today's date: ____/____/____

1. Demographic Questions:

Parish where you live _____

Job title: _____ Are you using the Profiles for work? ☐ Yes
☐ No

What you do?: _____

2. From whom did you get your copy of the Parish Profiles?

☐ The Office of Public Health (OPH): ☐ A Community Based Organization or nonprofit
☐ Regional Office ☐ Public access - like library, schools or internet
☐ Central Office ☐ Other (Please specify) _____
☐ A state agency (besides OPH)

3. How did you get your Parish Profile(s)?

☐ Sent/given to me unsolicited ☐ Requested it ☐ Searched it out and got it myself ☐ Don't remember

4. On a scale of 1 to 4, did you find that the Parish Health Profiles contributed to your understanding of your parish? (Circle the number)

1	2	3	4	0
Confused my understanding	Confirmed my understanding	Added a little more to my understanding	Added greatly my understanding	No opinion

If you answered "1," "2," or "3," what was the parish profile missing:

☐ Missing a topic you wanted to read about: _____
☐ Missing depth, you wanted more information in the topics it covered
☐ Other: _____

4. How are you going to use the Parish Profiles? (Please number the top three uses using "1" as the most important.)

☐ To write grants
☐ To learn more about my parish
☐ To do presentations
☐ To get ideas for community planning
☐ Other: _____

5. Which three chapters of the Parish Profiles were:

THE MOST useful to you?

1. _____
2. _____
3. _____

THE LEAST useful to you?

1. _____
2. _____
3. _____

6. Please rate the Parish Profiles for the following qualities:

Data Being Clear (you understood the information)

☐ Needed to be more clear ☐ Met my needs ☐ Was overdone on being clear

Comments: _____

Ease of Finding Information (information was where you could find it)

☐ Needed to be easier find information ☐ Met my needs ☐ Was overdone on pointing out information

Comments: _____

Informative (you learned something)

☐ Needed more information ☐ Met my needs ☐ Had too much information

Comments: _____

Inspirational (makes you want to do something)

☐ Needed more inspirational examples ☐ Met my needs ☐ Had too many inspirational examples

Comments: _____

Useful (information you can use)

☐ Needed more useful information ☐ Met my needs ☐ Was overdone on the useful information

Comments: _____

We would like to call a random selection of the people who answered this questionnaire to ask a few more questions about the Parish Health Profiles. Do you mind if we call you later to ask your opinion of the profiles and how you used them?

- ☐ Yes, you can call/contact me
☐ No

If you don't mind being contacted, please provide us with a way to contact you:

Name: _____

Address: _____

Phone: _____

Times you can be reached at this number: _____

e-mail: _____

7. **In the next issue of the Parish Health Profiles would you be interested in obtaining more information on a particular topic?**

- ☐ Yes
☐ No
☐ If yes, which topic? _____

We are always in the process of redesigning the Parish Profiles to make them as effective as possible. Please list any changes you would like to see made in the next edition of the profiles.

Comments:

Parish Profile Evaluations
Policy, Planning and Evaluation
325 Loyola Ave, Rm 515
New Orleans, LA 70112

Tape here

Office of Public Health
Policy Planning and Evaluation
325 Loyola Ave., Rm 515
New Orleans, LA 70112

